

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/578,032

FILING DATE

5/2/06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1			
2			1 -			
3			1 -			
4			1			
5			1			
6			1 -			
7			2			
8			1 -			
9			1 -			
10			1 -			
11			1 -			
12			1 -			
13			1 -			
14			1 -			
15			1 -			
16			1 -			
17			1 -			
18			1 -			
19			1 -			
20			1 -			
21			1 -			
22			1 -			
23			1 -			
24			1 -			
25			1 -			
26			1 -			
27			2			
28			1 -			
29			1 -			
30			1 -			
31			1 -			
32			2			
33			1 -			
34			1 -			
35			2			
36			1 -			
37			1 -			
38			1 -			
39			1 -			
40			1 -			
41			1 -			
42			1 -			
43			1 -			
44			1 -			
45						
46						
47						
48						
49						
50						
TOTAL IND.			1			
TOTAL DEP.			37			
TOTAL CLAIMS			38			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						